

THE DANCE GALLERY *festival*

MASTERCLASS PARTICIPANT RELEASE & WAIVER OF LIABILITY

I choose to participate in classes with The Dance Gallery Festival of my own free will and certify that I am in proper physical condition to take part in such activities.

If I have questions about whether an activity is suitable for me to pursue, I will consult my health care provider in making that decision. If I have any known physical vulnerabilities, conditions, or injuries, I agree to discuss them with the director before participating.

Release

By signing this document, I release The Dance Gallery Festival and its directors, staff, and teachers, (collectively referred to in this document as "DGF") from any liability or claim that I or my representatives may have against DGF with respect to any bodily injury, personal injury, illness, death, or property loss or damage that may result from my participation at DGF.

I voluntarily release and forever discharge and hold harmless DGF from any and all claims or demands for damages, loss of services, costs and expenses, injuries, attorney fees, and any other call for reparation from any and all injury to me or my property arising in any way from my participation in dance classes, workshops, performances, the use of DGF equipment or facilities, and any activities associated with DGF.

Risks

I understand that there are risks of physical injury associated with, arising out of, and inherent to dancing. These risks include the potential for slips and falls, sprains, strains, dislocations, soft tissue injuries, musculoskeletal injuries, podiatric conditions, and other risks not specified here. Understanding these risks and the potential for others not listed, I agree to personally accept and assume all of the risks present in my participation at DGF. My participation at DGF is entirely voluntary, and I choose to participate in spite of the risks.

Photographic Release

I understand that DGF may take photo and video recordings of me during my participation in DGF classes and activities. I convey to DGF full rights and interest in these recordings. I understand such recordings may be used in advertising or other published materials, physical or virtual.

If I do NOT consent to being photographed or video-recorded, I will make sure the director is aware of my concerns and the reasons for them, I will be proactive about avoiding being photographed or recorded, and I will hold DGF harmless if a photo or video recording of me is released despite all precautions. I understand that this choice may limit my participation in performances that are routinely photographed and/or videotaped.

Signature

All participants must sign a Signature Page at the start of class certifying that they have read this document, understand it in its entirety, and agree to be bound by its terms, before participating.

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PARTICIPANT RELEASE & WAIVER OF LIABILITY SIGNATURE PAGE

I certify that I have read the DGF Participant Release & Waiver of Liability document, understand it in its entirety, and agree to be bound by the terms included in each document. The Release and Waiver of Liability shall be binding on my heirs, successors, and personal representatives. If the participant is a minor, I certify that I have full legal authority to sign this release on their behalf.

Date: _____

Participant's Signature: _____

Participant's Name: _____
(please print)

Parent or Guardian's Signature: _____
(if participant is under age 18)

Parent or Guardian's Name: _____
(please print)

Relationship to Participant: _____
(please print)